

AC 4461 (1) BRIGHOUSE



**BOROUGH OF BRIGHOUSE
HEALTH DEPARTMENT.**

**ANNUAL REPORT
ON THE HEALTH
OF THE BOROUGH
For the Year 1923.**

F. A. BELAM, M.D., Ch.B., D.P.H.,
Medical Officer of Health.

BRIGHOUSE :
THE PREMIER PRINTING CO. (BRIGHOUSE), LTD.

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BOROUGH OF BRIGHOUSE.

Health Committee, 1923.

His Worship the Mayor :

Alderman G. F. SUGDEN, J.P.

Chairman :

Alderman TURNER.

Vice-Chairman :

Councillor ASQUITH.

Alderman	HARDAKER.	Councillor	HIRST,
Councillor	BARRACLOUGH.	„	OGDEN,
„	CROSS,*	„	REEVE,*
„	CROWTHER.	„	SUGDEN.*
„	HOLLAND.	„	WADSWORTH.

* In November, Councillor Asquith succeeded Alderman Turner as Chairman. Councillor Reeve succeeded Councillor Asquith as Vice-Chairman, and Councillors Brook, Ellis, Lawson succeeded the above-marked.

CHILD WELFARE SUB-COMMITTEE.

His Worship the Mayor (Alderman G. F. SUGDEN, J.P.).

Alderman	HARDAKER.*	Councillor	HIRST,
„	TURNER.*	„	REEVE,
Councillor	ASQUITH,	„	SUGDEN.*
„	CROSS,*	„	WADSWORTH.

Mrs. C. H. WALSHAW, Mrs. E. W. NAYLOR, Mrs. D. HARDAKER.

* In November, Councillors Holland, Lawson and Ogden succeeded the above-marked.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH
COMMITTEE.

GENTLEMEN,

I beg to submit my 1st Annual Report, being the 31st Annual Report of the Borough.

I have only been here since September last, and therefore cannot report from a personal knowledge on the events of the first part of the year, but since I have been here I have endeavoured to make myself familiar with the various aspects of public health in the Borough, and therefore can speak with a certain amount of knowledge of the conditions obtaining.

I have referred in detail under the appropriate headings to the various points that seem to me to require special mention.

I have the honour to be, Gentlemen,

Your obedient servant,

F. A. BELAM.

PUBLIC HEALTH STAFF.

Medical Officer of Health :

F. A. BELAM, M.D., Ch.B., D.P.H.

Sanitary Inspector :

T. ROBINSON, A.R.San.I., Sanitary Inspector, R.S.I.,
Meat and Food Certificate, R.S.I.,
Sanitary Science Certificate, R.S.I.

Assistant Sanitary Inspector :

R. C. BIRCH.

Lady Health Visitor :

Miss M. GRICE (Certs. General Nursing and C.M.B.).

GENERAL STATISTICS.

AREA (Aeres)	2,224
(Rastrick 1371, Hove Edge 450, Brighthouse 403)	
POPULATION (1923)	20,390
NUMBER OF INHABITED HOUSES (1921)	5,461
NUMBER OF FAMILIES OR SEPARATE OCCUPIERS (1921)	5,377
RATEABLE VALUE	£126,505
Sum represented by a Penny Rate	£421

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Registered Births—			Total.	Male.	Female.
Legitimate	..	270			
Illegitimate	..	15	285	139	146
			Birth Rate	..	13.48
Actual Births—			Total.	Male.	Female.
Legitimate	..	261			
Illegitimate	..	11	272	132	140
			Birth Rate	..	13.33
			Male.	Female.	Death Rate.
Deaths	..	272	129	143	13.33

Number of women dying in or in consequence of childbirth :—
Sepsis 1, Other 1.

Deaths of infants under 1 year per 1000 births :—

Legitimate, 52.55 ; Illegitimate, 66.66 ; Total, 56.14.

Deaths from Measles (all ages) 1	Rate per 1000 population	.049
.. Whooping Cough .. 3	..	.147
.. Diarrhœa (under 2 years) .. 3	..	.147
.. .. .	Per 1000 Births	10.52

BIRTH RATE, DEATH RATE, AND ANALYSIS OF MORTALITY, 1923.

	ANNUAL DEATH RATE PER 1,000 POPULATION.										Rate per 1,000 Births.		Percentage of Total Deaths.		
	Birth Rate per 1000 Total Popula- tion.	All Causes.	Enteric Fever.	Small-pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Violence.	Diarr. and Enteritis under 2 years.	Total Deaths under 1 year.	Certif. Causes of Death.	Inquest Cases.	Un- certified Causes of Death.
—	19.7	11.6	0.01	0.00	0.14	0.03	0.10	0.07	0.22	0.44	7.7	69.	92.0	6.9	1.1
England & Wales ..															
105 County Boro's and Great Towns, including London	20.4	11.6	0.01	0.00	0.15	0.03	0.12	0.09	0.22	0.40	9.9	72.	92.2	7.2	0.6
157 Smaller Towns, 20—50,000	19.8	10.6	0.01	0.00	0.19	0.02	0.10	0.06	0.21	0.38	6.4	69.	92.6	6.1	1.3
London	20.2	11.2	0.01	0.00	0.08	0.02	0.09	0.13	0.17	0.45	10.2	60.	90.8	9.1	0.1
Brighouse	13.48	13.33	0.00	0.00	0.047	0.00	0.147	0.00	0.44	0.39	10.52	56.14	95.9	4.1	0.0

1923. ALL AGES.				Nett Deaths at the subjoined ages of Residents, whether occurring within or without the District.							
M.	F.	Total	Under 1	1-2	2-5	5-15	15-25	25-45	45-65	65 Up.	
1. Enteric Fever	—	—	—	—	—	—	—	—	—	—	
2. Smallpox	—	—	—	—	—	—	—	—	—	—	
3. Measles	1	1	1	—	—	—	—	—	—	—	
4. Scarlet Fever	—	—	—	—	—	—	—	—	—	—	
5. Whooping Cough	1	3	1	—	2	—	—	—	—	—	
6. Diphtheria	—	—	—	—	—	—	—	—	—	—	
7. Influenza	4	9	—	—	—	—	—	—	2	7	
8. Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	
9. Meningococcal Meningitis	—	—	—	—	—	—	—	—	—	—	
10. Tuberculosis of respiratory system	12	21	—	—	1	1	4	10	5	—	
11. Other tuberculous diseases	5	6	—	—	1	3	—	—	—	2	
12. Cancer, malignant disease	7	21	—	—	—	—	—	1	14	6	
13. Rheumatic Fever	—	1	—	—	—	1	—	—	—	—	
14. Diabetes	1	1	—	—	—	1	—	—	—	—	
15. Cerebral Haemorrhage, &c.	14	31	—	—	—	—	—	1	12	18	
16. Heart Disease	21	44	—	2	—	3	3	2	10	24	
17. Arterio-sclerosis	7	18	—	—	—	—	—	—	2	16	
18. Bronchitis	14	29	2	—	1	—	—	4	7	19	
19. Pneumonia (all forms)	7	15	—	2	—	3	—	1	3	3	
20. Other respiratory diseases	1	3	—	—	—	—	—	—	1	—	
21. Ulcer of stomach or duodenum	1	1	2	—	—	—	—	—	—	—	
22. Diarrhoea, etc. (under 2 years).....	1	3	2	1	—	—	1	—	1	—	
23. Appendicitis and Typhlitis	1	2	—	—	—	—	—	—	—	—	
24. Cirrhosis of Liver	1	1	—	—	—	—	—	—	1	—	
25. Acute and Chronic Nephritis	3	4	1	—	—	—	—	1	1	1	
26. Puerperal sepsis	—	1	—	—	—	—	—	1	—	—	
27. Other accidents and diseases of pregnancy and parturition	—	1	—	—	—	—	—	1	—	—	
28. Congenital debility and malformation, premature birth.....	—	7	7	—	—	—	—	—	—	—	
29. Suicide	1	2	—	—	—	—	—	1	1	—	
30. Other deaths from violence.....	5	6	—	—	—	1	—	2	2	1	
31. Other defined diseases	19	40	2	—	—	—	—	6	10	22	
32. Causes ill-defined or unknown.....	—	—	—	—	—	—	—	—	—	—	
129	142	271	16	5	5	13	9	31	72	120	

The apparent considerable decrease in population from 20,670 in 1922 to 20,390 in 1923 is due to the 1922 figure being inaccurate. The Registrar-General explains this by stating that he gave a rough estimate for 1922, which has proved incorrect on closer examination, and the present figure is the result of careful correction.

The number of deaths is somewhat larger than last year, and this increase will be seen to be due to a marked rise in the number of those dying of cerebral hæmorrhage and heart disease. Diseases of the lungs, including influenza but excluding tuberculosis, have produced less deaths than last year, and the cancer mortality is also less.

That Brighouse must be a fairly healthy place is emphasised by the fact that nearly half of the deaths are of people of 65 and over. These deaths were due in the main to cerebral hæmorrhage, heart disease, arterio-sclerosis, and bronchitis.

There were three more deaths from lung tuberculosis than last year, and two more from whooping cough, in the case of the latter disease the three victims all being under 5 years of age.

Considering the hard variable weather experienced at the latter end of the year, it is strange that the mortality from pneumonia, bronchitis, influenza, other respiratory diseases, and nephritis is lower than last year, whilst that from rheumatic fever is the same. One must suppose that people here are acclimatised to inclement weather.

The infantile mortality is very markedly better than that of last year, due in the main, I should imagine, to the fact that mothers have been devoting their attention to the care of their babies and not working in the mills and handing over their children to the care of others. Breast feeding has been almost universal, and this alone contributes very largely to the excellent result. It is certainly a very mixed blessing when the mills are working full time and enticing mothers away from their natural duty of the care of their children. No amount of education seems to affect the result, for even as I write I hear that most of the mills are again working full time, and the mothers have gone back to them, leaving their babies with others, and putting them on the bottle instead of giving them their natural food. The consequence of past years of neglect are seen daily in the very considerable number of rickety adults with knock-knees or bow-legs in the streets of the town. This lessened mortality of babies is seen to be due to a reduction by four in deaths from congenital debility, from eight to three deaths from diarrhœa (this being under 2 years), which certainly appears to give support to my contention as to the ultimate causation.

Reference to the comparative figures between Brighouse and towns of a similar size shows that the Birth Rate of Brighouse (13.48) is extremely low—in fact, the lowest ever recorded since Brighouse became a Borough, the next to it being 1919, with a rate of 14.01.

The Death Rate is high in comparison with the rest of the country, and higher than that recorded last year or the two years before, but lower than that for 1919.

The Infantile Mortality Rate is low—much lower than that for the rest of the country, and is the lowest ever recorded for Brighouse; which is something of an offset to the low Birth Rate, and also shows that the work of the Health Visitor and Child Welfare Clinic is bearing fruit.

The most disquieting factor at the present moment for the prestige of the Borough is the progressive decrease in the population. When the Borough was formed in 1894 the population was estimated at 22,030. The census figures, however, are as follows :—1891, 20,666 ; 1901, 21,735 ; 1911, 20,845 ; 1921, 20,277. The Registrar-General's estimate for 1923 is 20,390. His explanation of the decrease appears to mean that Brighouse does not offer sufficient work to retain the young people, hence they go elsewhere. This is most unfortunate, as it will be the very best young blood which is leaving the town. This, coupled with the record low Birth Rate, raises a very serious question, and one which should be made known to the employers of labour in Brighouse if they have the honour and prestige of their town at heart. For it is they only who can save the situation by endeavouring to find more employment for the young people of the Borough in the town itself, so that they will not need to leave in order to obtain work. Now that the quantity of work is increasing and the mills again working full time, one must hope that things will be better. But I must point out that this decrease started long before the war, so that it is not the unemployment following the war which is altogether at fault, though that is, of course, responsible for some of the decrease of the past few years.

NOTIFIABLE DISEASES DURING THE YEAR.

The following tables show the infectious diseases notified during the year, and the nature of the house from which they came as regards the number of occupants per room.

TABLE A.—MONTHLY NOTIFICATION OF INFECTIOUS DISEASE.

Month.	Scarlet Fever.	Tuberculosis Lungs Other	Pneumonia	Diphtheria	Erysipelas	Ophthalmia Neonatorum	Enteric Fever.	Puerperal Fever.	Totals.
January ..	4	1	2	1	2	—	—	—	11
February ..	5	—	—	1	1	—	1	—	9
March ..	8	2	—	—	—	—	—	—	12
April ..	1	—	—	—	—	—	—	—	1
May ..	—	1	2	—	—	—	—	1	4
June ..	2	—	—	—	1	—	—	—	3
July ..	5	2	3	1	—	—	—	—	11
August ..	1	—	—	—	—	1	—	—	4
September ..	1	3	—	3	—	—	—	—	8
October ..	5	1	—	—	—	1	—	—	8
November ..	21	2	—	—	1	—	—	—	25
December ..	18	3	2	—	—	—	—	—	23
	71	15	9	6	5	2	1	1	119

TABLE B. DISEASES NOTIFIED DURING THE YEAR, DIVIDED INTO AGE GROUPS.
DEATHS IN BRACKETS.

AGE GROUPS.	Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.	65 and up- wards.	Total Cases.
Scarlet Fever . . .	1	1	6	6	3	42	7	3	2	—	—	—	71
Diphtheria . . .	—	—	1	—	—	3	1	—	—	1	—	—	6
Enteric Fever . . .	—	—	—	—	—	—	—	—	1	—	—	—	1
Tuberculosis—Lungs	—	—	—	—	—	—	—	3 (1)	7 (3)	2 (2)	3 (1)	—	15 (7)
Other	—	1	—	2	1	2	—	—	1	1	1	—	9

TABLE C.—INCIDENCE OF INFECTIOUS DISEASE WITH RELATION TO OVERCROWDING.

	Less than 1 person per room.	1 and less than 2 persons per room.	2 and less than 3 persons per room.	3 and less than 4 persons per room.	4 and less than 5 persons per room.	5 and less than 6 persons per room.	Total Cases.
SCARLET FEVER							
	(a) Removed to Hospital ..	9	33	15	—	2	63
	(b) Isolated at Home ..	8	—	—	—	—	8—71
DIPHTHERIA							
	(a) Removed to Hospital ..	1	1	—	—	—	2
	(b) Isolated at Home ..	2	2	—	—	—	4—6
ENTERIC FEVER							
	(a) Removed to Hospital ..	1	—	—	—	—	1
OPHTHALMIA NEONATORUM							
	—	—	—	—	—	—	2

TABLE D.—INFECTIOUS DISEASES NOTIFIED.

Year	Small-Pox.	Scarlet Fever	Diphtheria	Ent'e Fever	Erysipelas	Tuberculosis		Total	Pneumonia
						Lungs	Other		
1893	19	152	3	9	21				
1894	—	31	8	31	10				
1895	—	40	7	25	16				
1896	—	46	5	30	24				
1897	—	66	6	21	36				
1898	—	86	5	22	33				
1899	—	195	11	17	20				
1900	—	95	17	16	16				
1901	—	34	44	6	14				
1902	12	51	20	8	12				
1903	13	48	3	3	3				
1904	69	39	6	4	5				
1905	—	57	10	16	13				
1906	—	68	12	9	15				
1907	—	23	37	8	7				
1908	—	25	24	6	8				
1909	—	124	19	7	7				
1910	—	45	12	3	6				
1911	—	22	9	5	7				
1912	—	56	6	1	7				
1913	—	122	6	1	7	62	11	73	
1914	—	203	24	3	14	42	12	56	
1915	—	60	99	2	16	35	17	52	
1916	—	20	36	3	5	24	8	32	
1917	—	13	15	1	3	57	16	73	
1918	—	22	14	—	4	71	8	79	
1919	—	39	11	3	7	40	11	51	
1920	—	27	13	—	13	27	8	35	14
1921	—	151	13	—	3	21	6	27	7
1922	—	72	8	1	18	17	8	25	14
1923	—	71	6	1	5	15	9	24	9

It will be seen that there was less infectious disease of all forms this year than last, there being 119 notified cases in 1923, as against 138 in 1922.

Scarlet Fever was responsible for 71 cases, and occasioned no deaths. The disease was most prevalent during the last two months of the year, when 39 cases were notified. It was of the usual type as to onset, but there were a number of very severe cases, and considerably more complications occurred than is usually the case, doubtless due in the main to the extremely inclement weather experienced. Eight cases were isolated at home after it had been ascertained that such isolation could be successfully carried out, and the remainder were removed to the Clifton Isolation Hospital.

Diphtheria only affected six cases, and caused no deaths. There was one case each month in January, February and July, and three cases in September. Not since 1913 has the incidence of this disease been so low.

Enteric Fever was notified once in February. The case was treated in the Isolation Hospital, and made a successful recovery, only being detained just over a fortnight. Though his blood test was positive, this might have been due to his being twice inoculated while in the Army, as clinically his case was unlike enteric.

Pneumonia. Nine cases only of this disease were notified. None of the 13 deaths attributed to this cause were notified, and there must have been a considerable number of non-fatal cases unnotified. I can only imagine that it is not considered worth while to notify this disease. Apparently it is not realised what an important index this disease is as to the effect of the weather, clothing, and food on the people. In addition to this it is a very useful help to enable the Medical Officer to gauge the health of the community as regards influenza, whooping cough and measles, none of which are notifiable diseases. I hope the practitioners will realise this during the forthcoming year, and all cases will be notified.

Erysipelas was notified five times, and did not prove fatal to any case.

Puerperal fever occurred once, and was unfortunately fatal.

Poliomyelitis was not once notified. It is to be hoped that it did not occur and escape attention, as is so often the case. This is responsible for a very great deal of the crippling seen later in school

children, and if only the disease is treated in an early stage, much of this is avoidable. But unfortunately, parents do not recognise that the child is affected by this form of paralysis until the disease has done its worst, and "patching up" is all that can be done.

Ophthalmia Neonatorum was notified twice. In one case the recovery was perfect. In the other the child has still a nebula on one eye, but is undergoing hospital treatment at the present time.

Pulmonary tuberculosis affected 15 cases, according to the notifications received. But there were 20 deaths from this cause. It seems extremely difficult to obtain adequate notification of this disease, chiefly, I believe, because the doctor is very loathe to diagnose it until no other course is open, and probably only a few weeks or days before the fatal issue. This is a very great pity, as it is well known that much may be done towards the arrest or cure of this complaint in the early stages, but very little in the later. Also the importance of notification is manifest when the infectivity and dangerous nature of the disease are considered, especially in relation to the present overcrowded condition of so very many of the houses in this town. Supervision of contacts is all important, so that they may be treated immediately should they contract the disease. Only prompt notification can effect these things. Of the 27 deaths from tuberculosis, only 13 had been notified as suffering from the disease. This is a very serious state of affairs, as it is impossible to attempt to control tuberculosis if the chief instrument on which that control is based is not used. Right up to death these people had been freely spreading infection under no control of any kind, thus absolutely defeating the object for which notification was instituted. It is to be hoped that very considerable improvement in notification will take place during this year. The West Riding County Council undertake the care of this complaint, and their District Tuberculosis Officer is always willing to render assistance to any practitioner desiring it, and see any case at the Tuberculosis Dispensary or if necessary at the home. There is some difficulty in obtaining institutional treatment, but all that is possible is done to expedite the removal of cases urgently requiring sanatorium treatment.

Of the non-pulmonary form of tuberculosis there were nine notifications and seven deaths. I am afraid that this, like the pulmonary, is not a very true index of the actual number of cases.

The following table gives particulars of the notifications during the year.

TABLE E.—TUBERCULOSIS (All Cases known).

	NEW CASES.				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 ..	—	—	—	—	—	—	—	—
1 and under 5 ..	—	—	3	1	1	—	1	—
5 10 ..	—	—	3	1	—	—	1	1
10 15 ..	—	2	1	—	—	1	1	—
15 20 ..	2	2	—	—	—	2	—	—
20 25 ..	3	1	—	—	2	—	—	—
25 35 ..	2	5	1	1	1	4	1	—
35 45 ..	3	—	—	1	4	—	—	—
45 55 ..	2	1	1	—	2	2	—	—
55 65 ..	—	1	—	—	1	—	—	—
65 and upwards ..	—	—	1	—	—	—	2	—
Totals ..	12	12	10	4	11	9	6	1

Of the 27 deaths from Tuberculosis, only 13 had been notified as suffering from the disease, the remaining 14 never having been notified.

CAUSES OF SICKNESS.

There was nothing in the nature of a serious epidemic during 1923, and the year was remarkably free from sickness among adults. An epidemic of whooping cough occurred during the latter part of the year among young children, especially affecting those under five years of age, in the infants' departments of schools. This is dealt with in the School Medical Report, as also is the outbreak of measles. 130 cases of whooping cough were found by the Health Visitor of children under five years of age. The influence of overcrowding on this disease is well shown in the table.

TABLE F.—WHOOPING COUGH. Incidence in relation to Overcrowding.

1 person per room	2 persons per room	3 persons per room	4 persons per room	5 persons per room	3 persons per 2 rooms	5 persons per 2 rooms	7 persons per 2 rooms	Total Cases
16	25	40	24	3	11	9	2	130

PROFESSIONAL NURSING IN THE HOME.

(a) GENERAL.—There is one district nurse, whose salary is met from the Nurses Endowment Fund, a part of the Brighouse War Memorial. She undertakes any home nursing of general cases.

(b) There is no provision for the home nursing of infectious diseases. It would have been of very great advantage if there had been a nurse available for assisting the mothers during the epidemic of whooping cough which affected so many children during the last quarter of the year. Measles cases also would be benefited by the skilled assistance of a nurse were such available. As it was, a large number, if not the majority, of the cases of whooping cough were complicated by bronchitis, and three deaths from pneumonia took place.

The midwifery work of the town is undertaken by two certified midwives working privately, and owing to the fall in the birth rate their work was not heavy. No midwife is employed by the local authority.

CLINICS AND TREATMENT CENTRES.

A Maternity and Child Welfare Centre is provided in Huddersfield Road in the grounds of the Mechanics Institute. It is run by the Child Welfare Sub-Committee of the Health Committee, and assistance is kindly rendered by several ladies who attend regularly. The Medical Officer of Health attends each Wednesday afternoon, and the Lady Health Visitor attends daily. The accommodation is two rooms, and a shelter for prams is provided.

The School Clinic is in the Education Office, and is well equipped and suitable. There are a waiting room and consulting room.

The Tuberculosis Dispensary is in the Mechanics Institute, Huddersfield Road, and is run by the West Riding County Council.

There is no Venereal Diseases Clinic. Cases are treated at the neighbouring hospitals, and payment for these is made by the County Council.

The Maternity and Child Welfare Clinic is held each Wednesday, at 2-30 p.m. The Medical Officer is in attendance, together with the Health Visitor. Advice is given to the mothers, and regular weighing of infants carried out. Children up to five years of age are dealt with. An endeavour was made to teach the mothers plain sewing and knitting, but it was not appreciated.

The following work was done at the Clinic during the year:—

Attendances of mothers with babies	..	2088
Attendances of mothers alone	.. ..	71
New entrants during the year	.. ..	128
Number of babies attending Centre	..	222

The Medical Officer endeavours to make a note of each baby under 12 months once per month, and a full entry of each child is made in the ledgers. It must be remembered that from February to September there was no Medical Officer, hence all cases then found attending had to be entered in the Medical Officer's register as new cases, though they do not appear as such in the above figures, which are based on the Health Visitor's monthly reports.

During the last quarter of the year an effort was made to induce expectant mothers to use the Clinic for advice and help, but as it has never before been used for this purpose, and the time is short in which to overcome prejudice and antagonism towards anything new, there is no progress to report yet in this direction.

The Health Visitor, who is a qualified nurse and certified midwife, carries out supervision of children in their homes, and advises the mothers as to diet and clothing. Though she uses her utmost endeavour she is unable to succeed in persuading those mothers from the worst quarters of the town to attend the Clinic, though it is these whom advice and medical supervision would most benefit.

The Health Visitor also calls on expectant mothers and cases of still birth and ophthalmia, and renders what assistance she can.

Details of her work are as follows :—

Total number of birth notifications during the year	292
Cases attended by doctors	191
Cases attended by midwives only	101
(No notification was received for 10 doctors' cases, those attended by midwives all being notified.)	
Number of still births during year	20
(Doctors' cases, 17 ; midwives' cases, 3.)	
Visits to Homes :—	
Primary birth visits	288
Visits to infants under 1 year	1130
Visits to children, 1-5 years	1503

Nine births took place in hospitals and elsewhere outside the district, but as they were to residents they are included in the birth returns. This includes two still births.

Stillbirths.—Enquiry as to the cause of the stillbirths by the Health Visitor elicited the following facts. In eight cases there was anæmia, of these, four were millworkers in addition, and one had a contracted pelvis. In four more cases there was contracted pelvis ; in one a fall was the presumed cause ; in three disproportion in size seemed the deciding factor, and for the remaining four no cause could be ascribed, except that one was a mill worker.

It will be noted from this that medical advice would probably have benefited all of these mothers, and quite possibly have avoided the resulting stillbirths. It is so disheartening to a mother to go through all the previous pain and inconvenience with that unhappy result at the end of it all. To prevent this is the aim of ante-natal work, and to aid in the producing of strong, healthy babies.

Five mothers have been supplied with free milk during the year, careful enquiries being made as to the circumstances, and the supply being discontinued when funds became adequate again. Dried milk and Virol are supplied at just over cost price to those recommended for them.

Unfortunately the Notification of Births Act is not carried out in as satisfactory a manner as it might be, and a considerable number of births are only found on receipt of the weekly return from the local registrar. I hope this also will show considerable improvement during the present year.

School Clinic.—School children are seen each morning at the Clinic in the Education Office, and minor ailments are attended to. On four mornings a week the School Medical Officer attends and sees any children sent by teachers or parents. On Wednesdays the School Dentist attends and sees all dental cases.

HOSPITALS PROVIDED OR SUBSIDISED BY THE LOCAL AUTHORITY.

Infectious diseases are treated in the Clifton Hospital of the Brighouse Joint Hospital Board. As the Medical Officer of Health is Medical Superintendent, the town's cases can be immediately dealt with.

The Hospital serves Brighouse, Hipperholme, Halifax Rural District and Southowram, and offers 60 beds, divided into 40 Scarlet, 10 Diphtheria, and 10 Typhoid. There are four Scarlet Wards, two Diphtheria and two Typhoid Wards. The Diphtheria and Typhoid block is a permanent stone building. The Scarlet Wards are temporary buildings. Each pair of wards has a kitchen, and there is a steam laundry, boiler house, disinfector, mortuary, ambulance shed, and discharge block.

The number of cases of the various notifiable infectious diseases and the extent to which the isolation afforded at the Hospital was taken advantage of are detailed in Table C.

Smallpox isolation is undertaken by the Halifax Corporation, under an arrangement made in 1905, which is still unaltered. No case arose during the year, but a Huddersfield case had two Brighouse contacts, who were vaccinated and kept under constant supervision during the period in which they might have developed the disease. However, they remained free.

AMBULANCE FACILITIES.

(a) For infectious cases a horse ambulance is employed. The vehicle is kept at the Clifton Hospital, and a horse is obtained under contract when required.

(b) For non-infectious and accident cases a motor ambulance is provided, and removes cases free within a certain radius.

LABORATORY WORK.

(a) **BACTERIOLOGY.**—This is carried out entirely at the West Riding County Laboratory at Wakefield. All material is sent there in receptacles and boxes provided by them. A positive diphtheria result is reported immediately by telephone or telegram, and a duplicate sent to the Medical Officer of Health. This, of course, entails great accuracy of clinical diagnosis in the event of a doubtful case of diphtheria, as valuable time is lost if the bacteriological report is solely relied upon.

(b) **CHEMICAL.**—Chemical analyses are carried out in Bradford by the County Analyst, and the fees met by the Borough.

WATER SUPPLY.

Water is supplied in most part by Halifax, under an agreement made some years ago, and a small quantity from a local gathering ground and reservoir. As it is not filtered a bacteriological and chemical analysis is carried out six-monthly to ensure that it is pure. The reports on the samples taken in October were satisfactory. It is necessary to keep a careful watch on the Lands reservoir to avoid contamination of the water from that source. The analyses deal with this.

FOOD SUPPLIES.

Regular inspections under the Sale of Food and Drugs Acts are carried out by the Sanitary Inspector, and the results of these are contained in his report.

With reference to this subject I should like to draw attention to the practice of exposing food outside shops and in places where it can readily become contaminated by road dust, which consists largely of manure. This is a most insanitary practice, and one which seems to me to be quite unnecessary. If food is exposed in the ordinary way in shop windows, even there it runs a risk of contamination by a certain amount of dust from inside the shop, but this is not quite so serious a matter as road dust. Articles such as meat, vegetables, cheese, bacon, fish, etc., are the chief offenders. I cannot think that it will be any loss to the owners of the shops in question if food is kept inside and not exposed to such contamination, and it will greatly benefit the public health.

MILK SUPPLY.

Milk is a food which is most important to infants and growing children, and also benefits adults to a very great extent if it is sold in a pure condition. The average daily consumption of milk per head of the population in England and Wales is about $\frac{1}{4}$ of a pint. I believe in the United States it is considerably over 1 pint, in fact nearer to 2 pints. I think that the remedy for the falling off in the consumption of milk lies in the hands of the farmers themselves. If they would ensure that the milk supplied was pure and clean, as could quite easily be done, the very small additional cost would be gladly paid by the consumer. The public could be educated to the benefits of pure milk. This has already been done with marked success in other places in the country, notably Reading, and certified milk is, I believe, in very great demand wherever it is sold, although it costs more than ordinary milk. I do not ask that the farmers should supply certified milk, but I certainly think it would be of inestimable advantage if they did. But I do ask that they should make every endeavour to get the cows into mistals with plenty of air, light and ventilation, which three things are well known to be essential for the health of human beings and for the prevention of tuberculosis. Were this done there would not be the number of cases of tuberculosis in cattle and of bovine tubercular infection of children that there is at present. In addition to this attention should be paid to keeping the milk clean, which could easily be done by cleansing the udders efficiently before milking, washing the hands of the milker before he commences his work, milking into hooded pails to prevent chaff, sawdust, etc., blowing in, and keeping the milk covered on all occasions. Also cooling the milk down immediately after milking helps it to keep sweet longer. I quite appreciate that the co-operation of the public is necessary that the milk should be kept clean in the homes, but it should arrive there clean in the first place. It is important to remember that clean milk keeps two or three times as long as dirty milk. A close inspection is being made of the cowsheds with the idea of adopting new byelaws, and it is hoped this will have a satisfactory effect upon the milk in the future.

HOUSING.**Record of Inspections, &c., in form prescribed by Ministry of Health.**

Number of new houses erected during the year :—

(a) Total	6
(b) As part of a municipal scheme	—

1. UNFIT DWELLING HOUSES.

Inspection—(1). Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	150
(2). Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910.. .. .	16
(3). Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.. .. .	—
(4). Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	71

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICE.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers.. .. .	71
--	----

3. ACTION UNDER STATUTORY POWERS.

A.—Proceedings under section 28 of the Housing, Town Planning, etc., Act, 1919.

(1). Number of dwelling houses in respect of which notices were served requiring repairs	—
(2). Number of dwelling houses which were rendered fit :—	
(a) by owners	—
(b) by Local Authority in default of owners.. .. .	—
(3). Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close .. .. .	..

B.—Proceedings under Public Health Acts.

- | | |
|---|---|
| (1). Number of dwelling houses in respect of which notices were served requiring defects to be remedied | — |
| (2). Number of dwelling houses in which defects were remedied :— | |
| (a) by owners | — |
| (b) by Local Authority in default of owners .. | — |

C.—Proceedings under section 17 and 18 of the Housing,
Town Planning, etc., Act, 1909.

- | | |
|---|---|
| (1). Number of representations made with a view to the making of Closing Orders | — |
| (2). Number of dwelling houses in respect of which Closing Orders were made | — |
| (3). Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit | — |
| (4). Number of dwelling houses in respect of which Demolition Orders were made | — |
| (5). Number of dwelling houses demolished in pursuance of Demolition Orders | — |

ADOPTIVE ACTS, BYELAWS, ETC.

LOCAL ACTS.

The following Local Acts, General Adoptive Acts and Byelaws are in force in the district :—

The Brighthouse Corporation Act, 1895.

1907.

ADOPTED ACTS.

1. Public Health Acts Amendment Act, 1890, Parts II, III, IV, and V—28th August, 1895.
2. Baths and Washhouses Acts, 1846 to 1899—28th June, 1911.
3. Notification of Births Act, 1907—25th October, 1911.
4. Infectious Disease Prevention Act, 1890—August, 1921.

BYELAWS.

Common Lodging Houses—21st August, 1889.

Nuisances—21st August, 1889.

Slaughterhouses—21st August, 1889.

Public Slaughterhouses—21st August, 1889.

Dairies, Cowsheds and Milkshops—24th May, 1899.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
BOROUGH OF BRIGHOUSE.

GENTLEMEN,

I beg to submit herewith my Annual Report for the year 1923.

The most important item in the year's work was the commencement made with the Conversion Scheme, which has occupied so much of my time and precluded me giving the necessary attention to other matters, particularly housing inspection, smoke abatement, workshops, and the keeping of proper records, all of which are of the greatest importance, but impossible to carry out efficiently with the present staff.

I am, Gentlemen,

Your obedient servant,

T. ROBINSON.

Sanitary Inspector.

HOUSING INSPECTIONS.

The number of inspections made is comparatively small. Overcrowding is frequently met with, but as the occupiers of overcrowded houses cannot find alternative accommodation, it is useless taking action, which would merely transfer the overcrowding from one house to another. Two houses in respect of which Closing Orders were made in previous years are still occupied.

RECORD OF INSPECTIONS.

Houses inspected for defects under Housing and Public						
Health Acts .. .. .	..	..	..	..	..	150
Houses found satisfactory .. .. .	..	..	..	..	..	63
Houses with defects remedied under Housing Acts	16					
„ „ „ Public Health Acts	71					— 87
Houses remedied under Public Health Acts						
(1923 Inspections) .. .. .	..	..	..	..	..	71
(1922 Inspections) .. .. .	..	..	..	..	..	20
Houses remedied under Housing Act						
(1923 Inspections) .. .. .	..	..	..	..	..	16— 107
Houses with defects under Housing Acts not disposed						
of at end of 1923 .. .. .	..	..	..	..	..	35

The 35 houses not disposed of formed the subject of an appeal by the owner to the Ministry of Health. These, however, have been disposed of at the time of writing this report, but will appear in the 1924 records.

MEAT AND FOOD INSPECTION.

The number of Slaughterhouses remains the same as last year, viz., one Public Slaughterhouse and two Private Slaughterhouses, but only one of the latter is regularly used.

The class of meat slaughtered in the district is generally of a good quality, and the amount of diseased meat found represents a low percentage. In all cases the diseased and unsound meat was voluntarily surrendered after I had inspected the same and announced my judgment to the butcher.

The unsound meat condemned amounted to 38½ cwts., all of which (with the exception of 20 lbs.) was due to tuberculosis.

Eight animals were affected; in four cases the whole of the carcases and offal were condemned, and in the other cases offal only.

A large proportion of the meat sold in the Borough is slaughtered outside. The Public Slaughterhouse is an asset to the town, but as this is an old building and held on a yearly tenancy, it is desirable

to make arrangements either for acquiring the existing site and buildings, with a view to improvement or reconstruction, or obtaining another site and erecting new premises.

The number of animals slaughtered at the Public Slaughterhouse during the year was as follows :—

Beasts	..	..	..	..	..	705
Sheep and Lambs	..	..	..	..	..	1218
Calves	..	..	..	..	..	68
Pigs	..	..	..	..	..	948
						<hr/>
						2939
						<hr/>

FINANCIAL STATEMENT.

					£	s.	d.
To Wages	..	..	..	..	125	12	9
Gas, Water and Coke	..	..	..	..	38	14	2
Rent, Rates and Insurance	..	..	..	..	44	15	6
Tools, Repairs, &c.	..	..	..	..	23	7	9
					<hr/>		
					232	10	2
By Tolls	..	..	..	..	197	4	11
					<hr/>		
Nett Cost	..	..	..	..	£35	5	3
					<hr/>		

FOOD AND DRUGS SAMPLES.

Twenty-four samples were submitted to the Public Analyst. These comprised 16 Milk, 4 Butter, and 4 Sweet Spirit of Nitre.

The milk samples were of a high standard, showing an average of 9.12% of non-fatty solids and 3.62% of fats, as compared with the presumed standard of 8.5% and 3.0% respectively. Only one sample came below the standard, this containing 2.91% of fat equal to 87% of the standard, but the deficiency was too small for any action to be taken.

All the butter samples were genuine, but one of the Sweet Spirits of Nitre contained only 27.1% of Ethyl Nitrite. This was an informal sample, and was followed up by a formal sample, which was found to be genuine. The vendor gave an explanation of the circumstances connected with the first sample, and was cautioned.

The sampling of milk is done by arrangement with the County Council, the latter bearing all expense and providing legal assistance.

DAIRIES, COWSHEDS AND MILKSHOPS.

There are 22 cowkeepers on the Register of Producers of Milk. On the Register of Retail Purveyors of Milk there are 33 persons, 14 of whom are Cowkeepers in the Borough, 4 Retail Purveyors in the Borough, and 15 outsiders who retail in the Borough.

The majority of the cowsheds are well constructed, with good light and ventilation, but in a few cases the buildings are very unsatisfactory. The occupiers of the latter are now being approached, with a view to an improvement being effected, but it is a difficult matter to obtain an improvement, as it will involve in some cases the construction of new buildings. The responsibility under the Dairies, Cowsheds and Milkshops Order rests upon the occupier, and as he naturally is not prepared to erect new buildings on land which he does not own, the improvement depends upon the making of arrangements between himself and his landlord. Efforts are being made by interviewing the farmers to encourage them to adopt up-to-date methods in connection with the grooming of cattle and other measures to ensure a clean milk. As some farmers are already doing this, there can be no question of its practicability, and the additional labour involved is justified by the results.

At present there are approximately 263 cows in the Borough.

FACTORY AND WORKSHOPS ACTS.

Four complaints were received from H.M. Inspector of Factories appertaining to sanitary accommodation in factories.

Five new workshops have been opened during the year.

No lists of outworkers employed in the district have been received from manufacturers during the year.

The number and nature of the workshops are :—

Bakehouses	26	Joiners	7	Soap Makers	4
Blacksmiths	7	Knitters	4	Sweet Packer	1
Bootmakers	31	Laundries	5	Tailors	13
Botanical Brewer	1	Leather Currier	1	Tin Plate Workers . .	6
Brushmakers . . .	2	Maltsters	2	Tripe Boilers	4
Burler & Menders	2	Mattress Maker	1	Sugar Boiler	1
Cabinet Makers	5	Milliners	16	Upholsterers	4
Cloggers	4	Painters	7	Wheelwrights	6
Coach Builder . .	1	Paper Bag Maker	1	Wire Worker	1
Coopers	5	Photographers	4		
Dressmakers	30	Plumbers	8		225
Gut Scrapers	2	Polishers	5		
Jewellers	6	Saddlers	2		

SUMMARY OF INSPECTIONS.

Bakehouses	..	..	..	..	..	..	55
Complaints investigated	..	..	..	..	..	..	62
Common Lodging Houses	..	..	..	..	..	..	84
Cowsheds, Dairies and Milkshops	..	..	..	..	..	..	160
Canal Boats	..	..	..	..	..	..	14
Dwelling Houses— Housing and Public Health Acts	..	..	..	..	..	..	150
„ Infectious Disease	..	..	..	..	..	..	110
„ Disinfected	..	..	..	..	..	..	120
Drains Tested	..	..	..	..	..	..	577
Factories and Workshops	..	..	..	..	..	..	66
Offensive Trades	..	..	..	..	..	..	51
Slaughterhouses and Food Premises	..	..	..	..	..	..	314
Re-visits to Property under notice	..	..	..	..	..	..	400
Schools Inspected	..	..	..	..	..	..	71
Schools Disinfected	..	..	..	..	..	..	57
Smoke Observations	..	..	..	..	..	..	35
Visits to work in progress	..	..	..	..	..	..	537
							2863

NUISANCES.

Nuisance Inspections	..	..	..	..	..	691
Nuisances reported, 1923	..	..	..	..	..	142
Nuisances in hand at end of 1922	..	..	..	..	..	192
						334
Nuisances abated during 1923	..	..	..	..	..	315
Nuisances remaining unabated at end of 1923	..	..	..	..	..	19
						334
Notices served— Informal	..	..	..	..	..	332
„ Statutory	..	..	..	..	..	2

INFECTIOUS DISEASE.

In connection with infectious disease, the enquiries made are arranged to cover the general conditions of the house, in addition to the special enquiries appertaining to the patient, etc.

Books from the Public Library and School Libraries are handed over to the Health Department for destruction. The schools are disinfected four times a year at holiday times.

Infected houses visited	110
Houses fumigated	120
Cases where bedding removed for disinfection ..	120
Schools disinfected	57
Library books destroyed	25

COMMON LODGING HOUSES.

There are two common lodging houses, with accommodation for 100 and 64 persons respectively, both of which are kept in satisfactory condition.

OFFENSIVE TRADES.

The offensive trades carried on in the district are :—

Tripe Boilers	3
Soap Boilers	3
Gut Scrapers	2
	8

SANITARY ACCOMMODATION.

A start was made with the Conversion Scheme in February, when the first tenders were approved. The prices which have ruled justified the Committee in proceeding by competitive tender rather than by scheduled prices. In order to facilitate supervision and obtain the greatest advantage in adjusting pail collection, the conversions are being carried out in districts subject to certain exceptions. Very little opposition has been encountered, no doubt due to the fact that it is a contributory scheme. North Ward was almost cleared of pails at the end of the year.

The estimated cost of conversion was £8 each for the Corporation contribution of one-half the cost, whereas the actual contributions on 374 conversions averaged £5 2s. 7d., making a total cost to the Corporation of £1918 13s. 11d., as compared with the estimate of £2992. (These figures relate to the financial year.) The first district selected was somewhat favourable to low cost, but in recent months there has been a tendency for costs to rise slightly. Further reference will be made to the effect of conversions on cleansing costs in the section of my report relating to cleansing. Good progress has been made, and there is every prospect of the scheme being completed much earlier than originally proposed.

In explanation of some of the items in the subjoined statement, it may be stated that where a house is furnished with two closets (a W.C. and a pail or privy), one W.C. is considered to be sufficient for the requirements of the house, and the owner is asked to abolish the second closet if it be a pail or privy, but should he prefer to retain two closets, he converts the second at his own cost. If the houses are provided with less than one closet for each "through" house, or one for two "back-to-back" or "single" houses, he is required to provide such additional closets as will bring him up to the standard, the contribution being made only towards the cost of conversion of the existing accommodation. In no case is a reduction in the existing standard allowed except in the cases previously referred to where a house has more than one W.C.

The following statement indicates the progress made :—

NOTICE SERVED :—

To convert Pails	..	..	..	..	..	428
To convert Privies	..	..	..	..	..	77
To abolish Pails	..	..	..	..	..	49
To abolish Privies	..	..	..	..	..	5
						<hr/>
						559
						<hr/>

CONVERTED AND ABOLISHED :—

		Converted.	Abolished.	Total
Houses—Pails	..	280	39	319
Privies	..	38	—	38
Other Buildings—Pails	..	25	17	42
Privies		19	—	19
		-----	-----	-----
		362	56	418
		-----	-----	-----

WATER CLOSETS PROVIDED :—

Contributory	..	..	..	..	..	318
Non-contributory	..	..	..	..	..	44
Additional	..	..	..	..	..	18
						<hr/>
						62
						<hr/>
						380
						<hr/>

The accommodation at the end of 1923 was :—

	No.	Per cent.
Fresh water closets	2530	49.97
Waste water closets	154	3.04
Pail closets	2220	43.85
Privies	159	3.14
	<hr/> 5063	<hr/> 100.00

REFUSE RECEPTACLES :—

Dustbins	2126	68.47
Ashpits	859	27.67
Privy Middens—Covered	103	
Open	17	3.86
	<hr/> 3105	<hr/> 100.00

PUBLIC CONVENIENCES.

The receipts indicate 18,663 users, as compared with 15,770 the previous year, a daily average of 51 and 43 respectively. The net expenditure being £22 17s. 5d. less than last year.

To Maintenance	£96 6 10
Interest and Sinking Fund	75 7 8
	<hr/> 171 14 6
By Receipts	77 15 3
	<hr/>
Net Expenditure	£93 19 3
	<hr/>

CLEANSING—HOUSE REFUSE.

COLLECTION.

All particulars relating to Cleansing are for the financial year ending 31st March, 1924.

Team Labour is hired under a yearly contract, and Manual Labour employed direct.

The average yield of dry refuse is 15.79 cwt. per 1000 inhabitants per day, as compared with 16.73 cwt. the previous year. This is accounted for by a reduction of 463 loads. The amount of refuse

collected in the early part of 1922-23 was exceptionally high, and would largely account for the difference. Another factor in the reduction was the introduction of the new scale for Trade Refuse collection, and the resumption by the Salvation Army of paper collection from tradesmen. The amount collected during the current year may therefore be taken as a normal average.

There has been a considerable increase in the number of dustbins in use. The practice of collecting separately from dustbins and ashpits, which was instituted last year, has been continued, and the cost of collection (manual and team labour only) kept separate. The cost per ton from dustbins is $6/7\frac{3}{4}$, and from ashpits $4/8\frac{3}{4}$, the average number of loads per cart per day being 3.68 and 5.4 respectively. Dustbins represent an average of 44 per load, and ashpits 3.6 per load. Although collection is cheaper from ashpits, these cause considerable nuisance owing to the refuse being blown about, and it is desirable to substitute dustbins wherever practicable for ashpits.

An interesting feature which has a bearing on the relative costs of dustbins and ashpits is that whilst 46% of houses have dustbins and 54% ashpits, the percentage of cost is 45% and 55% respectively, but the amount of refuse collected is 37% and 63% respectively. Thus the houses with dustbins produce less refuse than those with ashpits, and although costing more per ton, cost practically the same per house.

With a view to minimising the nuisance occurring in the loading of carts, two new carts have recently been purchased. These are fitted with experimental covers, and have a larger capacity and lower loading line than those displaced.

The question of introducing mechanical vehicles has been considered on several occasions, and whilst the low average number of loads collected from dustbins would appear to indicate the practicability of adopting mechanical transport, there are many other factors to be considered, such as reduction in team labour costs, variation in the situation of tips and their unsuitability for mechanical vehicles, the irregular and changing distribution of dustbins, steep gradients, inaccessibility of courts to large vehicles, etc. When dustbins become more general and disposal is definitely concentrated at one point, it will be possible to review the whole position, with a prospect of advising more satisfactorily on the question.

The proportion of galvanised pails to wooden tubs is rapidly becoming more favourable, the numbers now being—pails 75%, tubs 25%, as compared with 53% pails, and 47% tubs the previous year.

The effect of conversions on cleansing costs is difficult to estimate during the progress of the scheme, but certain factors can be ascertained fairly accurately. One van has been practically eliminated

during the year, and apart from one consignment of new pails purchased at the commencement of the year, it has been unnecessary to purchase more, the number of pails and tubs freed as a result of conversions having enabled these to be used for replacement of defective tubs, which would otherwise have been repaired or replaced with new pails.

Ignoring any slight saving on disposal, and taking three items only on collection, I estimate on a conservative basis that conversions have resulted in a saving of £269, made up as follows :—

Reduction of 690 loads, at 4/- per load	..	..	£138
„ in cost of new pails and tub repairs	..		111
„ in cost of van repairs	..	..	20
			<hr/>
			£269
			<hr/>

As the annual sum for repayment of sinking fund and interest on the total conversion grants made during the year is approximately £150, there is a net saving of £119.

RECORD OF REFUSE COLLECTED.

Receptacles Emptied—				No. of times	
			1923-24.	emptied.	1922-23.
Dustbins .. ..	..	..	101,937	52	87,269
Ashpits .. ..	..	..	12,690	12	11,433
Privy Middens ..	..	..	1,786	12	1,291
Pails .. ..	..	..	120,708	52	133,498

Loads Collected—

Ashes .. ..	..	..	6,243		6,706
Nightsoil (Pails)	..	..	5,748		6,438

AVERAGE STAFF EMPLOYED.

Ashes—						1923-24.	1922-23.
Loaders .. ..	..	..	..	..	..	4.96	5.42
Teamers .. ..	..	..	..	..	..	4.72	5.14
						<hr/>	<hr/>
						9.68	10.56
						<hr/>	<hr/>
Nightsoil—							
Loaders .. ..	..	..	..	..	..	4.15	4.77
Teamers .. ..	..	..	..	..	..	3.92	4.44
						<hr/>	<hr/>
						8.07	9.21
						<hr/>	<hr/>
						17.75	*19.77
						<hr/>	<hr/>

* In last year's report this figure is given as 21.09, but as certain costs which were previously allocated to collection are now charged to disposal, the figure has been adjusted so as to correspond with this year's allocation.

This remark applies conversely to the figures for Disposal on next page.

DISPOSAL.

I would again emphasise the urgent need for a more satisfactory method of refuse disposal than that of crude tipping. The accumulations of refuse on the tips are a blot on the district, and whilst regard must be had to the cost of any scheme, the primary consideration should be to obtain a sanitary disposal system. Such will undoubtedly cost more than tipping, but the additional cost will be fully justified.

A Sub-Committee visited Nelson, Eccles and Newark to inspect Salvage Plants, and an enquiry has been held by the Ministry of Health into the Corporation's application for compulsory power of purchase of the Sanitary Depot and adjoining land, but the use to which the land shall be put has not yet been determined.

The large accumulation of nightsoil at the Depot is gradually diminishing, and another year will probably see the whole of it disposed of.

The places of disposal, quantities, rents, etc., are set out below :—

Place of Disposal.			Loads.		Rent.
			1923-24.	1922-23.	
Ashes—					
Depot	..	..	131	300	£25 p.a. plus £10 for water and drainage.
Hipperholme	..	..	244	326	£5 per annum.
Farrar's	..	..	1174	1455	1/6 per load.
Taylor's	..	..	3680	3078	1/- „
Crowtrees Lane	..	..	158	772	9d. „
Elland Edge	..	..	576	446	6d. „
Farms, &c.	..	..	280	359	Nil.
			—	—	
			6243	6706	
			—	—	
Pails—					
Depot	..	..	4506	4840	
Farms	..	..	1242	1598	
			—	—	
			5748	6438	
			—	—	
			11991	13144	
			—	—	

The 131 loads sent to the Depot weighted 134 tons, an average of 1 ton per load.

Proportion disposed of by each method :—

				Ashes.		Nightsoil.	
				1923-24.	1922-23.	1923-24.	1922-23.
Depot ..	..	2.1 %	4.5 %	78.4 %	75.0 %		
Tips ..	..	93.4 %	90.2 %	—	—		
Farms, &c. ..	..	4.5 %	5.3 %	21.6 %	25.0 %		
				Average Staff Employed.			
				1923-24.	1922-23.		
Manual Labour ..	..	..	..	2.23	2.55		
Team Labour ..	..	..	..	0.03	0.07		
				———	———		
				2.26	2.62		
				———	———		

CLEANSING COSTS.

1923-24.											1922-23.			
		Esti- mate.	Actual Expenditure.						Expendi- ture.					
			Ashes.			Nightsoil.			Total.					
			£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
COLLECTION.														
Wages	..	1387	718	12	10	663	9	4	1382	2	2	1631	4	6
Team Labour	..	2050	972	1	0	893	9	0	1865	10	0	3086	10	6
Carts & Vans	..	260	180	2	1	88	18	7	269	0	8	227	0	10
Tub Repairs	..	75		—		74	7	5	74	7	5	109	5	10
Pails	..	75		—		36	17	10	36	17	10	113	2	0
Disinfectants	..	50	6	10	0	43	12	0	50	2	0	52	7	0
Implements and Repairs	..	20	6	10	9	6	10	8	13	1	5	15	13	2
		3917	1883	16	8	1807	4	10	3691	1	6	5235	3	10
DISPOSAL.														
Wages	..	460	136	0	8	136	0	8	272	1	4	249	19	8
Team Labour	..	57	2	2	9	2	2	9	4	5	6	23	16	4
Tipping	..	250	296	13	4		—		296	13	4	299	0	0
Repairs, Tools, &c.	..	50	13	3	9	13	3	9	26	7	6	61	9	5
Dustbins	..	—	91	18	8		—		91	18	8	80	7	11
Road	..	25	11	8	7	11	8	7	22	17	2	24	4	0
Rent, Rates, Insurance	..	80	40	17	2	40	17	2	81	14	4	79	2	6
		922	592	4	11	203	12	11	795	17	10	817	19	10
Less Receipts (details below)		70	125	16	4	40	14	3	166	10	7	152	16	3
Total Disposal		852	466	8	7	162	18	8	629	7	3	665	3	7
Gross Total	..	4769	2350	5	3	1970	3	6	4320	8	9	5900	7	5

RECEIPTS.

SALVAGE.					£	s.	d.	£	s.	d.
Scrap Iron	..	..	..	..	..	0	5	6		
Manure	..	..	..	..	..	36	19	0		
Breeze	..	..	..	..	..	2	7	3		
					<hr/>			39	11	9
SUNDRIES.										
Dustbins	..	..	..	..	..	85	2	0		
Removing Refuse	..	..	..	..	..	29	10	8		
Disinfectants	..	..	..	..	..	9	15	8		
Flushing	..	..	..	..	..	2	8	6		
Tipping	..	..	..	..	..	0	1	0		
Easement	..	..	..	..	..	0	1	0		
					<hr/>			126	18	10
								<hr/>		
								£166	10	7
								<hr/>		

The analysis of costs for ashes and nightsoil are got out on a different basis, because ashes are common to all houses, whereas only 49% of houses have pail closets. Again, as ashes are common to all towns, and there are comparatively few possessing pail closets, the costs for ashes and nightsoil are kept separate as far as possible, to facilitate comparison with other towns. As only 21% of refuse has been weighed, the total refuse is estimated on the same basis as last year, which is as accurate as possible.

As compared with last year, there is a reduction of £1580, of which sum Team Labour accounts for £1240, the bulk of this being due to the reduction in the Team Labour Contract.

ANALYSIS OF COSTS.

		1923-24		Total.	1922-23.
		Collection.	Disposal.		
ASHES.					
Per Head	.. ..	1/10.2	5.5	2/3.7	2/11.3
., 1000 Inhabitants		92/7/6	22/17/6	115/5/0	147/2/7
., House	.. ..	6/10.6	1/8.4	8/7	11/1.6
., Load (avg. 2.69 Cu.					
	Yd.) ..	6/0.4	1/5.9	7/6.3	9/0.8
., Cube Yard	..	2/3	6.6	2/9.6	3/4.4
., Ton (at 7 cwt. per					
	Cu. Yd.) ..	6/4.9	1/7.1	8/0	9/7.4

NIGHTSOIL.

Per Load	.. ..	6/3.4	6/8	6/10.2	8/10.3
„ Pail	.. ..	3.6	0/0.3	3.9	5.0
„ Pail per annum	..	15/7.2	1/4.6	16/11.8	1/1/11.7

RATES OF PAY.

Manual Labour, per hour	.. ..	1/1.1	1/0.9
Team Labour (Driver and Horse)—			
Ashes per day	.. ..	14/0	1/2/0
Nightsoil per load	.. ..	3/1.3	4/6

COSTS IN RELATION TO RATES.

Rates (exclusive of Poor & County Rates)	8/8½	12/4¼
Product of One Penny Rate	421/0/0	340/0/0
Cleansing Rates—Ashes—Collection	4.47d.	7.52d.
Disposal	1.10d.	1.42d.
	5.57d.	8.94d.
Nightsoil—Collection	4.3d.	7.88d.
Disposal	0.4d.	0.53d.
	4.7d.	8.41d.
	10.27d.	17.35d.
Percentage of Rates levied (exclusive of Poor and County Rate)	9.8%	11.7%

VETERINARY INSPECTOR'S REPORT.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH
COMMITTEE.

GENTLEMEN,

I have pleasure in submitting my first Annual Report in connection with the inspection of dairy cows in the Borough of Brighouse, and also of a large number of cattle outside the Borough from which milk is sold in Brighouse.

During my inspection I have come across only one case of Tubercular Mastitis, and I am very pleased to say that the owner accepted my opinion and agreed with me, so that the animal was immediately destroyed and the diagnosis confirmed by post mortem examination. Three other cases of Pulmonary Tuberculosis have also been disposed of to the "Knackers Yard," and post mortems made and the diagnosis verified.

In my tour of inspection I have made 60 visits, and with the exception of the above-mentioned cases, I find the dairy cows in the Borough of Brighouse in a splendid state of health.

Outside the Borough I have visited 30 farms from many of which milk is delivered in Brighouse, and again I am pleased to say the health of the cows is splendid.

Yours faithfully,

HAROLD DYSON, M.R.C.V.S.

HUDDERSFIELD.

MAY, 1924.

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